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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) RIC97006P1
	In re Application of KNOBLOCK et al.	
	Application Number 09/995,193	Filed 11/27/01
	For SYSTEM AND METHOD TO AUTOMATE EQUIPMENT PLACEMENT AT REMOTE SITES	
	Group Art Unit 2171	Examiner TBA
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <div style="display: flex; justify-content: space-between;"><div style="width: 70%;"><p><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</p><p><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</p><p><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</p><p><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</p><p><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</p><p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p><p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p><p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p><p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p><p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>13-2491</u>.</p><p>I have enclosed a duplicate copy of this sheet.</p><p>I am the <input type="checkbox"/> applicant/inventor</p><p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p><p><input checked="" type="checkbox"/> attorney or agent of record.</p><p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.</p></div><div style="width: 25%; text-align: right; vertical-align: top;"><p>\$ <u>110.00</u></p><p>\$ _____</p><p>\$ _____</p><p>\$ _____</p><p>\$ _____</p></div></div> <div style="text-align: right; margin-top: 20px;"><p>RECEIVED</p><p>APR 22 2002</p><p>OFFICE OF PETITIONS</p></div>		

April 10, 2002

Date



Signature
Frank A. McKiel, Jr.

Typed or printed name

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☐ Total of _____ forms are submitted.